1	2	3	4	5
41	CGHS	500.00	300.00	400.00
42	NEIGRIHMS	12651.00	12627.00	7500.00
43	Health Sector Disaster Management	100.00	100.00	100.00
44	RIMS	N.A.	N.A.	100.00
45	LGBRIMH	N.A.	N.A.	300.00
46	RIPANS	N.A.	N.A.	200.00
47	Development of Nursing Service	200.00	200.00	150.00
48	Tobacco Free Initiatives	N.A.	N.A.	800.00
49	Forward linkages	N.A.	N.A.	100.00

Statement-

Major achievements in North Eastern States under NRHM

- 42051 ASHAs have been selected against the target of 44857.
- Rogi Kalyan Samitieshave been constituted in 55 Districts Hospitals, 161 CHCs & 1095 PHCs.
- 8 new GNM Schools have been approved for assistance under NRHM.
- Funds to the tune of Rs. 1 crore each have been provided to 54 District Hospitals in the NE States. Strengthening of 5 district hospitals in Assam and Champai District Hospital in Mizoram have been approved as per requirements.
- State Hospitals *viz.* S.T.N.M. Hospital at Gangtok, Sikkim and State Civil Hospital at Aizawl, Mizoram are being assisted for upgradation. The State Civil Hospitals at Itanagar and Pasighat have also been assisted to the tune of Rs. 1 crore each.
- Of the 7643 Sub-Centres, 6003 are functional with Joint Accounts and 2488 have a ANMs in position.
- Of the 1109 PHCs, 793 have been made operational 24x7,273 have Ayush MOs **co-**located in the PHCs and 245 have a Staff Nurses in position.
- Under Janani Suraksha Yojana Scheme the number of beneficiaries during 2005-06, 2006-07 & 2007-08 (Till October 07) were 23219,217311 and 238000 respectively.
- All the States of north-eastern region have achieved the goal of elimination of leprosy *(i.e.* Prevalence Rate of less than 1 case per 10,000 population).
- An amount of Rs. 1026 Crore has been approved for the State PIPs of all the eight NE States for various activities under NRHM. During 2007-08.
- Upgradation of Gauhati Medical College, Guwahati Assam has been taken up.

Revamping the Existing Polio Eradication Strategy

3469. SHRI B.K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether, with generous assistance and involvement of WHO and UNICEF in the National Polio Eradication Programme, India still has the highest number of Polio cases in the world;

(b) whether Government has examined the Global Polio Eradication Initiative data released recently clubbing India with Pakistan, Nigeria and Afganistan where Polio is still an epidemic;

(c) whether based upon these data, Government proposes to revamp the existing polio eradication strategy; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Yes Sir. India has highest number of polio cases in the world this year. However, impressive progress has been made in curtailing transmission of Wild Polio Virus Type 1 in the country. Most polio cases in 2008 are of type 3 polio virus. The type 3 incidence is declining rapidly following immunization rounds in Uttar Pradesh and Bihar with monovalent oral polio vaccine type 3 (mOPV3).

(b) Yes Sir.

(c) and (d) The India Expert Advisory Group on polio (IEAG) comprising of National and International Experts from World Health Organization (WHO), United Nation Children's Fund (UNICEF) and Centre for Disease Control (CDC) Atlanta reviewed the Pulse polio Programme on 19-20th December, 2007. The IEAG suggested that in the first half of 2008 the activities should be undertaken with the objective of interrupting WPV1 transmission in the low transmission season, while maintaining good control of wild polio virus type 3 (WPV3).

Following steps are taken by the Government to achieve goal of zero transmission:—

— National Immunization days were implemented in January and February, 2008. mOPVl was used in Uttar Pradesh, Bihar, Delhi and other high risk States and Districts and tOPV in other areas.

— Sub National Immunization Round was undertaken in March 2008 in Uttar Pradesh, Bihar Delhi, Mumbai and other areas at risk using mOPV3 on 30th March, 2008.

— MoP Up immunization rounds have been implemented in response to detection of Wild polio virus in the State of Maharashtra, Haryana, Orissa.

— 5 more Sub National Round is planned for implementation in UP, Bihar and other areas at risk during April, June, July, September and October, 2008.

To ensure quality of immunization rounds and to achieve high coverage following actions are taken;—

- Migrat6ry populations from UP and Bihar are being identified in the States of Punjab, Haryana, Gujarat and these migratory children are being covered during the SNID in UP and Bihar starting from August, 2007.
- In the States of UP and Bihar every new born child is being identified and vaccinated during the polio immunization campaigns and is being tracked for 8 subsequent rounds.
- In order to reach every eligible child during the pulse polio round, apart from the strategy of vaccinating children at fixed booths and house to house visits, efforts in vaccinating children in transit at railway stations, inside long distance trains, major bus stops, market places, religious congregations, major road crossings etc. through out the country have been intensified.

• Social Mobilization activities are being intensified by involving the local influencers, community and religious leaders to improve community participation and acceptance of polio vaccine.

Achievement of the development of Health Research

3470. SHRIMATI VIPLOVE THAKUR: Will the Minister of HEALTH AND FAMILY WELFARE be please to state:

(a) what are the details of the research that has been undertaken/is being undertaken by the Department of Health Research;

(b) what have been the achievements of the department so far in the field of health research; and

(c) what measures Government proposes to take to further promote research in diagnostic and therapeutic techniques and also to take the benefits of such research to the common masses?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) The Department of Health Research was created within the Ministry of Health & Family Welfare only in September, 2007 and formally launched on 5.10.2007. As such no funds were available for the new Department during 2007-08 for undertaking research activities. The department is in formative stage. A blue print for creating structure of the department has been prepared to facilitate operationalization of new Department.

(c) In the area of diagnostics and therapeutics, the Department of Health Research proposes to initiate as Flagship programmes for example technology Development Translation project in drugs, diagnostics, vaccines, devices, health care projects; Health Technology Assessment and Management programme which would include horizon scanning for health technology, clearing house for health research technologies and opportunities for commercialization. Development of Diagnostics for viral Diseases and of predictive marker for diseases would be taken up as Mission-mode projects.

Public-Private Partnerships would be encouraged for developing the products and taking them to the community. The Department will also coordinate a joint initiative between ICMR and National Innovation Fund (NIF) which is under DST

Cancellation of **licenses** of vaccine **manufacturing** PSUs

3471. SHRI TAPAN KUMAR SEN:
SHRI PRASANTA CHATTERJEE:

Will the Minister of HEALTH AND FAMILY WELFARE be please to state:

(a) whether production licenses of three vaccine manufacturing public sector units were cancelled and ordered to suspend production forthwith;

(b) if so, the details thereof; and

(c) the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) Yes, Sir. The licences of the